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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Melanie First name A. Middle name Knippen Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5695	

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Debtor 1 Melanie A. Knippen

Document Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
	doing business as riames	EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		165 W. Lance Drive Des Plaines, IL 60016			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Melanie A. Knippen

Case number (if known)

7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Ch	napter 7			
		☐ Ch	napter 11			
		☐ Ch	napter 12			
		☐ Ch	napter 13			
3.	How you will pay the fee		about how yo	u may pay. Tyր attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
					stallments. If you choose this option ts (Official Form 103A).	n, sign and attach the Application for Individuals to Pay
			but is not requapplies to you	uired to, waive Ir family size ai	your fee, and may do so only if yound you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.
			ше Аррисанс	n to nave the t	Chapter 7 Filling Fee Walved (Offic	nai Form 1036) and me it with your pention.
9.	Have you filed for bankruptcy within the last 8 years?	■ No				
	last o years:	☐ Ye	s. District		When	Case number
			District		When	Case number Case number
			District		When	Case number
				-		
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No	. Go to li	ne 12.		
	residence.	☐ Ye	_{s.} Has yo	ur landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?
				No. Go to line	12.	
				Yes. Fill out <i>Iri</i> bankruptcy pe		Judgment Against You (Form 101A) and file it with this

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Case number (if known) Debtor 1 Melanie A. Knippen

art	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name	Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code		
	it to this petition.		Check	the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above	9		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set ap flines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stat ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the p U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat						
	of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
	illillediate attention:		,	my io it nocuou.			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	the property?			
	-				Number, Street, City, State & Zip Code		

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Debtor 1 Melanie A. Knippen

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

2/17/17 1:05PM

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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2/17/17 1:05PM Document Page 6 of 51 Case number (if known) Debtor 1 Melanie A. Knippen Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Melanie A. Knippen Signature of Debtor 2 Melanie A. Knippen Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on February 17, 2017

MM / DD / YYYY

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Debtor 1 Melanie A. Knippen

Case number (if known)

2/17/17 1:05PM

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	February 17, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
David M. Siegel		
Printed name		
David M. Siegel & Associates		
Firm name		
790 Chaddick Drive Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone (847) 520-8100	Email address	
#06207611		
Bar number & State		

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Fill in this information to identify your case:

Debtor 1 Melanie A. Knippen
First Name Middle Name Last Name

Debtor 2 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

amended filing

Official Form 106Sum

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

· u	t 1: Summarize Your Assets		
		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,645.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,645.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	59,771.00
	Your total liabilities	\$	59,771.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	360.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	360.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersonal	family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Document Debtor 1 Melanie A. Knippen

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

360.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Documer Documer	t Page 10 of 51	2/17/17 1:05PN
Fill in this inform	ation to identify your	case and this filing:		
Debtor 1	Melanie A. Knipp	Middle Name	Last Name	
Debtor 2	Filst Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS	
Case number				☐ Check if this is an amended filing
	m 106A/B			
<u>Schedule</u>	e A/B: Prop	erty		12/15
hink it fits best. Be nformation. If more Answer every quest	as complete and accura space is needed, attach ion.	ate as possible. If two married a separate sheet to this form.	ce. If an asset fits in more than one category, people are filing together, both are equally res. On the top of any additional pages, write you fou Own or Have an Interest In	sponsible for supplying correct
	· · · · · · · · · · · · · · · · · · ·	<u></u>		
. Do you own or na	ave any legal or equitabl	e interest in any residence, bu	ilding, land, or similar property?	
No. Go to Part				
☐ Yes. Where is	the property?			
Part 2: Describe Y	our Vehicles			
someone else drive	es. If you lease a vehic	le, also report it on Schedule	cles, whether they are registered or not? e G: Executory Contracts and Unexpired Le	
3. Cars, vans, tru	cks, tractors, sport u	tility vehicles, motorcycles	•	
■ No				
☐ Yes				
			I vehicles, other vehicles, and accessoriels, snowmobiles, motorcycle accessories	es
■ No				
☐ Yes				
			ries from Part 2, including any entries fo	
Part 3: Describe Y	our Personal and Hous	ehold Items		
Do you own or h	ave any legal or equit	able interest in any of the	following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Maj		e, linens, china, kitchenware		
Yes. Descri	be			

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Case 17-04647

DCDIO	ivicianie A.	Kilippeli Case humber (m)	
		TV & Electronics	\$450.00
Exai	other collec	d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stam tions, memorabilia, collectibles	p, coin, or baseball card collections;
Exai	musical inst	tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; ca	anoes and kayaks; carpentry tools;
■ N	amples: Pistols, rifle	es, shotguns, ammunition, and related equipment	
ПΝ	amples: Everyday	clothes, furs, leather coats, designer wear, shoes, accessories	
		Normal Clothes	\$400.00
■ N □ Y 13. Nor <i>Exa</i> □ N	o es. Describe n-farm animals amples: Dogs, cats	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, g	,one, god, one
		Cat	\$25.00
■ N	•	nd household items you did not already list, including any health aids you did not	list
		e of all of your entries from Part 3, including any entries for pages you have attach t number here	\$1,375.00
Part 4:	Describe Your Fina	ncial Assets	
Do you	own or have any	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ N	a <i>mples:</i> Money you o	ı have in your wallet, in your home, in a safe deposit box, and on hand when you file you	ur petition

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Case number (if known) Document Debtor 1 Melanie A. Knippen 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No ■ Yes..... 17.1. Checking/Savings **Bank of America** \$270.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

■ No

☐ Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Yes........... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

 $\hfill \square$ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?

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De	ebtor 1	Melanie A. Knippen	Case number (if known)	
				Do not deduct secured claims or exemptions.
28.	Tax refu	unds owed to you		
	■ No	,		
	☐ Yes. 0	Give specific information about them, including whether you alre	eady filed the returns and the tax years	
29	Family	support		
	•	les: Past due or lump sum alimony, spousal support, child supp	ort, maintenance, divorce settlement, property	settlement
	■ No			
	☐ Yes. (Give specific information		
30.		mounts someone owes you les: Unpaid wages, disability insurance payments, disability ber benefits; unpaid loans you made to someone else	nefits, sick pay, vacation pay, workers' comper	nsation, Social Security
		Give specific information		
31.		es in insurance policies les: Health, disability, or life insurance; health savings account	(HSA); credit, homeowner's, or renter's insurar	nce
		Name the insurance company of each policy and list its value.		
		Company name:	Beneficiary:	Surrender or refund value:
32.	If you a	erest in property that is due you from someone who has di are the beneficiary of a living trust, expect proceeds from a life in the has died.		eive property because
	_	Give specific information		
	— 100.	ONO SPECIMO INFORMACIONI.		
33.		against third parties, whether or not you have filed a lawsules: Accidents, employment disputes, insurance claims, or right		
	_	Describe each claim		
34.	Other c	ontingent and unliquidated claims of every nature, includir	ng counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
35.	-	ancial assets you did not already list		
	■ No			
	⊔ Yes.	Give specific information		
36		ne dollar value of all of your entries from Part 4, including a rt 4. Write that number here		\$270.00
Pa	art 5: Des	cribe Any Business-Related Property You Own or Have an Interest	In. List any real estate in Part 1.	
		wn or have any legal or equitable interest in any business-related p	property?	
	No. Go			
	⊔ Yes. G	o to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Ow ou own or have an interest in farmland, list it in Part 1.	vn or Have an Interest In.	
46.		own or have any legal or equitable interest in any farm- or	commercial fishing-related property?	
		Go to Part 7.		
	☐ Yes.	Go to line 47.		

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Case number (if known) Document Debtor 1 Melanie A. Knippen

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,375.00 Part 4: Total financial assets, line 36 58. \$270.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$1,645.00 Copy personal property total \$1,645.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$1,645.00

		DOCUME	<u>eni Pade 15 015</u>				
Fill in this information to identify your case:							
Debtor 1	Melanie A. Knippe	en					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							
Case number							
(if known)					Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	u Claim a	s Exempt
---------	----------	---------	-----------	-----------	----------

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Household Goods & Furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line Horr Schedule A/D. V.1			100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(a)
TV & Electronics Line from Schedule A/B: 7.1	\$450.00		\$450.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A.D. 1.1			100% of fair market value, up to any applicable statutory limit	
Normal Clothes Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
Line Holl Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	
Cat Line from Schedule A/B: 13.1	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
Line Horr Schedule A/D. 13.1			100% of fair market value, up to any applicable statutory limit	35 ILCS 5/12-1001(b) 35 ILCS 5/12-1001(b) 35 ILCS 5/12-1001(a)
Checking/Savings: Bank of America	\$270.00		\$270.00	735 ILCS 5/12-1001(b)
Line Horr Scriedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Melanie A. Knippen

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this infor	mation to identify your	case:		
Debtor 1	Melanie A. Knipp	en		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Case 17-04647	Doc 1 Filed 02/17/1 Document	Page 18 of 51	Desc Main 2/17/17 1:05PN
Fill ir	n this information to identify your			
Debte	or 1 Melanie A. Knipp	non.		
DCDI	First Name	Middle Name	Last Name	
Debte	or 2			
(Spous	se if, filing) First Name	Middle Name	Last Name	
Unite	ed States Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case	number			
(if knov	wn)			☐ Check if this is an
				amended filing
Offic	cial Form 106E/F			
	edule E/F: Creditors V	Vho Have Unsecure	d Claims	12/15
Sched Sched eft. At	ule G: Executory Contracts and Unex ule D: Creditors Who Have Claims Sec ttach the Continuation Page to this pa and case number (if known).	oired Leases (Official Form 106G) cured by Property. If more space ge. If you have no information to	o list executory contracts on Schedule A/B: Proper). Do not include any creditors with partially secure is needed, copy the Part you need, fill it out, numb report in a Part, do not file that Part. On the top of a	d claims that are listed in er the entries in the boxes on the
Part				
_	o any creditors have priority unsecure	ed claims against you?		
	No. Go to Part 2.			
	Yes.			
Part				
	o any creditors have nonpriority unse			
L	No. You have nothing to report in this	part. Submit this form to the court w	rith your other schedules.	
	Yes.			
u th	nsecured claim, list the creditor separate	ly for each claim. For each claim lis	f the creditor who holds each claim. If a creditor has ted, identify what type of claim it is. Do not list claims a but have more than three nonpriority unsecured claims f	Iready included in Part 1. If more
				Total claim
	Artesian Wellness and Rec	overy		
4.1	Cent	Last 4 digits of a	account number	\$8,138.00
	Nonpriority Creditor's Name 2500 S. Kanner Hwy	When was the de	ebt incurred?	
	Stuart, FL 34994 Number Street City State Zlp Code	As of the date vo	ou file, the claim is: Check all that apply	
	Who incurred the debt? Check one		and the diam let enough an anacappy	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and ar	other Type of NONPRI	ORITY unsecured claim:	
	☐ Check if this claim is for a com	По		
	debt	☐ Obligations ar	ising out of a separation agreement or divorce that you	did not
	Is the claim subject to offset?	report as priority o		
	No	☐ Debts to pens	ion or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	, Medical	

Best Case Bankruptcy

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Case number (if know)

2/17/17 1:05PM

Debtor	1 Melanie A. Knippen	Case number (if know)	
4.2	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number 7m26	\$11,405.00
	Bankruptcy Department CA6-919-0241, PO Box 5170 Simi Valley, CA 93062	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Judgment	
4.3	Basic Whole Body Wellness LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$540.00
	4371 Northlake Blvd. #203 Palm Beach Gardens, FL 33410	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.4	Behavioral Health Servicesw at	Last 4 digits of account number	\$277.00
	Nonpriority Creditor's Name St. Lucie Medical Center PO BOX 740776	When was the debt incurred?	
	Cincinnati, OH 45274 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical	

Case 17-04647

Debte	Melanie A. Knippen	Case number (if know)	
4.5	Best Buy/CBNA	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name PO Box 6497	When was the debt incurred?	
	Sioux Falls, SD 57117-6497	When was the destiniculted:	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Purchases	
4.6	Century Clinical Lab Inc.	Last 4 digits of account number	\$16,504.00
	Nonpriority Creditor's Name 1395 ShotqunRd.	When was the debt incurred?	
	Sunrise, FL 33326	When was the dept incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.7	Chase Card	Last 4 digits of account number	\$5,503.00
	Nonpriority Creditor's Name PO Box 15298	When was the debt incurred?	
	Wilmington, DE 19850	As of the date you file, the claim is: Check all that apply	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
		Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Purchases	
	_ 100	- Other, Specify 1 districted	

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Case number (if know)

	Meianie A. Knippen	- Case Humber (il know)	
4.8	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	\$2.00
	PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Purchases	
1.9	First Financial Bank SD Nonpriority Creditor's Name	Last 4 digits of account number	\$1,343.00
	363 W. Anchor Drive	When was the debt incurred?	
	North Sioux City, SD 57049-5154	-	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Purchases	
1.1	Medicredit, Inc.	Last 4 digits of account number	\$100.00
,	Nonpriority Creditor's Name PO Box 1629	When was the debt incurred?	· ·
	Maryland Heights, MO 63043-0629 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Constitution of	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	
	⊔ Yes	Other. Specify Neurola	

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Natera	Last 4 digits of account number	\$8,772.00
Nonpriority Creditor's Name PO BOX 8427	When was the debt incurred?	
Pasadena, CA 91109		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Medical	
Pharmerica	Last 4 digits of account number	\$100.0
Nonpriority Creditor's Name		
PO BOX 644458	When was the debt incurred?	
Pittsburgh, PA 15264 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the damins. Oneon all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical	
Portfolio Pocovory Associatos		¢2 212 0
Portfolio Recovery Associates Nonpriority Creditor's Name	Last 4 digits of account number	\$2,313.0
120 Corporate Blvd., Ste. 100 Norfolk, VA 23502	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Debts to pension or profit-sharing plans, and other similar debts	
No	Debts to pension or profit-sharing plans, and other similar debts	

Debtor 1 Melanie A. Knippen

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4.1 4	Portfolio Recovery Associates	Last 4 digits of account number	\$3,203.00
	Nonpriority Creditor's Name 120 Corporate Blvd., Ste. 100	When was the debt incurred?	
	Norfolk, VA 23502 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.1	Target NB	Last 4 digits of account number	\$1,354.00
	Nonpriority Creditor's Name CCS Gray OPS Center PO Box 6497	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Purchases	
4.1 6	The Garden Wellness Center	Last 4 digits of account number	\$117.00
	Nonpriority Creditor's Name 16565 NE 4th Ave. Miami, FL 33162	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

	0 111 1 5 1	D 10 11 11 11 11 0	
	Last 4 digits of account num	nber	
PO Box 982238 El Paso, TX 79998-2238		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Bank of America	On which entry in Part 1 or I Line 4.2 of (<i>Check one</i>):	Part 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims	
		· · · · · · · · · · · · · · · · · · ·	
Debtor 1 Melanie A. Knippen	Document	Page 24 of 51 Case number (if know)	2/17/17 1:05
0400 11 01011	D 0 0 1 1 11 0 0 0 2 / 1 1 / 1 1	2.110.00 02/11/11 10:01:00 D000 Wall	2/17/17 1:05

PO Box 982238 El Paso, TX 79998-2238		■ Part 2: Creditors with Nonpriority Unsecured Claims	
2.1 doc, 17, 10000 2200	Last 4 digits of account number		
Name and Address Best Buy Credit Services	On which entry in Part 1 or Part 2 Line 4.5 of (<i>Check one</i>):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims	
PO Box 78009 Phoenix, AZ 85062-8009	((■ Part 2: Creditors with Nonpriority Unsecured Claims	
1 Hoolik, A2 00002 0000	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2		
Blatt, Hasenmiller, Leibsker	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
10 S. LaSalle St., Ste. 2200		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago, IL 60603	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Cap1/BSTBY	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 30253		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Salt Lake City, UT 84130	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Portfolio Recovery Associates	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Bankruptcy Department 500 W. 1st Ave		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Hutchinson, KS 67501-5222	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Portfolio Recovery Associates	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Bankruptcy Department 500 W. 1st Ave		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Hutchinson, KS 67501-5222	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Target NB	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Attn:Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440		Part 2: Creditors with Nonpriority Unsecured Claims	
יייייייייייייייייייייייייייייייייייייי			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,771.00

Last 4 digits of account number

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Page 25 of 51 Case number (if know) Debtor 1 Melanie A. Knippen

> \$ Total Nonpriority. Add lines 6f through 6i. 6j. 59,771.00

		DOCUME	<u>eni Pade 26 0151</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Melanie A. Knipp	en		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		State	Zii Code	
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	,				
	Name				_
	Number	Street			
	City		State	ZIP Code	_
					·

		Docume	nt Page 27 o	of 51	2/17/17 1:05PN
Fill in this i	nformation to identify your	case:			
Debtor 1	Melanie A. Knipp				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number	er				☐ Check if this is an amended filing
Official	Form 106H				
Schedu	ule H: Your Cod	ebtors			12/15
1. Do yo ■ No □ Yes 2. Withit Arizona ■ No. C □ Yes.	, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo	you are filing a joint case, do not be a lived in a community property Nevada, New Mexico, Pueuse, or legal equivalent live	operty state or territory erto Rico, Texas, Washi with you at the time?	y? (<i>Community property states</i> ngton, and Wisconsin.)	
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Officia	f that person is a guarant	or or cosigner. Make s	if your spouse is filing with y sure you have listed the cred 6G). Use Schedule D, Schedu	itor on Schedule D (Official
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	P Code		Column 2: The creditor to Check all schedules that a	o whom you owe the debt apply:
3.1				☐ Schedule D, line	
N:	ame			☐ Schedule E/F, line ☐ Schedule G, line	
	umber Street jty	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	ame			☐ Schedule E/F, line ☐ Schedule G, line	
N	umher Street			_	

State

City

ZIP Code

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Fill in this information to identify your case: Debtor 1 Melanie A. Knippen Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is: (If known) ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date: Official Form 1061 MM / DD/ YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. **Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ☐ Employed If you have more than one job, Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Include part-time, seasonal, or Employer's name self-employed work. **Employer's address** Occupation may include student or homemaker, if it applies. How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 N/A deductions). If not paid monthly, calculate what the monthly wage would be.

3.

0.00

+\$

3.

Estimate and list monthly overtime pay.

N/A

Deb	tor 1	Melanie A. Knippen	-		Case	number (<i>if k</i>	now	7)				
					For	Debtor 1				Debtor -filing s		
	Сор	y line 4 here	4.		\$		0.0	0	\$	illing 5	N/A	
5.	Lict	all payroll deductions:						_				
Э.		• •	E		æ			^	¢		NI/A	
	5a.	Tax, Medicare, and Social Security deductions	5a 5b		\$_ \$		0.0		\$_		N/A	
	5b.	Mandatory contributions for retirement plans	50		\$ _		0.0		\$ 		N/A	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	50		\$ _		0.0	_	Φ_		N/A	
	5e.	Insurance	5e		\$ —		0.0 0.0	_	\$ 		N/A N/A	
	5f.	Domestic support obligations	5f		\$ 		0.0 0.0		φ		N/A	
	5g.	Union dues	5g		\$-		0.0 0.0	_	Ψ_		N/A	
	5g. 5h.	Other deductions. Specify:		ا. ۲.+	\$ -				+ \$		N/A	
_					Ψ_			_				
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.0		\$		N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.0	0	\$		N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	88	a.	\$		0.0	0	\$		N/A	
	8b.	Interest and dividends	8b	Ο.	\$		0.0	0	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	c .	\$	17	0.0	0	\$		N/A	
	8d.	Unemployment compensation	80	d.	\$		0.0	0	\$		N/A	
	8e.	Social Security	86	€.	\$		0.0	0	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Link Card Pension or retirement income	8f 8g		\$_ \$	19	0.0 0.0		\$ \$		N/A N/A	
	8h.	Other monthly income. Specify:).+	\$		0.0	_	+ \$		N/A	
		· · · · ·	_	г				_	Ė			I
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	36	0.0	0	\$		N/A	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		360.00	1.[\$		N/A	- \$	360.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		300.00	1 1	Ψ-		-17/	\[\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	300.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. In the contribution of the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.	depe		,	,			,	Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies								12.	\$	360.00
										•	Combine	
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?								monthly	income
		Yes. Explain:						_				

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Fill	in this information t	to identify vo	ur ca <u>se:</u>					
Deb		elanie A. Kı				Chec	k if this is:	
Deb	tor 2					_	An amended filing A supplement show	wing postpetition chapter
(Spc	ouse, if filing)				_		13 expenses as of	
Unite	ed States Bankruptcy	Court for the:	NORTH	IERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY	
	e number nown)							
	ficial Form		_					
Be a	ormation. If more s nber (if known). A	accurate as space is nee	possible. eded, atta y question	If two married people ar ch another sheet to this				
1.	Is this a joint cas		ioiu					
	■ No. Go to line □ Yes. Does De		n a separa	ate household?				
	□ No □ Yes. D	ebtor 2 mus	t file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate House	hold of Debt	or 2.	
2.	Do you have dep	pendents?	■ No					
	Do not list Debtor Debtor 2.	1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the	06						□ No
	dependents name	55.						☐ Yes ☐ No
								☐ Yes
								□ No □ Yes
								□ No
	_							☐ Yes
3.	Do your expense expenses of peo yourself and you	ple other th	nan 🗖	No Yes				
exp	imate your expens	ses as of yo	ur bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the				government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
4.	The rental or hopayments and an			ses for your residence. In r lot.	nclude first mortgage	4. \$		0.00
	If not included in	n line 4:						
	4a. Real estate	e taxes				4a. \$		0.00
		omeowner's				4b. \$		0.00
				ipkeep expenses		4c. \$		0.00
5.				dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00 0.00

Debtor	Melanie A. Knippen	Case num	ber (if known)	
6. Ut	ilities:			
6a	. Electricity, heat, natural gas	6a.	\$	0.00
6b	. Water, sewer, garbage collection	6b.	\$	0.00
6c	. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d	. Other. Specify:	6d.	\$	0.00
7. Fo	od and housekeeping supplies	7.	\$	190.00
8. C r	nildcare and children's education costs	8.	\$	0.00
9. CI	othing, laundry, and dry cleaning	9.	\$	0.00
10. Pe	rsonal care products and services	10.	\$	0.00
	edical and dental expenses	11.	\$	100.00
12. Tr	ansportation. Include gas, maintenance, bus or train fare.			
Do	not include car payments.	12.	\$	70.00
13. E r	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14. C r	naritable contributions and religious donations	14.	\$	0.00
-	surance.			
	o not include insurance deducted from your pay or included in lines 4 or 20.	4.5	•	
	a. Life insurance	15a.		0.00
	b. Health insurance	15b.	·	0.00
_	c. Vehicle insurance	15c.	·	0.00
	d. Other insurance. Specify:	15d.	\$	0.00
	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.	4.0	•	
	ecify:	16.	\$	0.00
	stallment or lease payments:	170	¢.	0.00
	a. Car payments for Vehicle 1	17a.	·	0.00
	b. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.	·	0.00
	d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as		\$	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). her payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	Ψ	0.00
	her real property expenses not included in lines 4 or 5 of this form or on Scho		our Income	
	a. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	d. Maintenance, repair, and upkeep expenses	20d.		0.00
	e. Homeowner's association or condominium dues	20e.	·	0.00
	her: Specify:	21.	·	0.00
_ 1. O	пот. ореону.		·Ψ	0.00
	lculate your monthly expenses			
22	a. Add lines 4 through 21.		\$	360.00
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	360.00
	Ilculate your monthly net income.	22	•	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	360.00
23	b. Copy your monthly expenses from line 22c above.	23b.	-\$	360.00
00	Cultivariation of the company of the			
23	 Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23c.	\$	0.00
	The result is your monthly net income.			
Fo mo	p you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?			se or decrease because of a
	No. Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Melanie A. Knippe	en			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _				_	0
(II KNOWN)				⊔	Check if this is an amended filing
You must file thi obtaining mone	is form whenever you fi	n connection with a bankr	or amended schedules.	ect information. Making a false statement, co n fines up to \$250,000, or imp	
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attorn	ey to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person				etition Preparer's Notice, nature (Official Form 119)
that they ar X /s/ Mel Melani Signatu	lanie A. Knippen ie A. Knippen ire of Debtor 1	that I have read the sumn	X Signature of D	With this declaration and Debtor 2	
Date _	February 17, 2017		Date		

	Ca	ISE 17-04647 DO	Document	Page 33 of 51	Desc Main 2/17/17 1:05
Fil	l in this inforn	nation to identify your ca	ise:		
De	btor 1	Melanie A. Knipper			
De	btor 2	First Name	Middle Name	Last Name	
(Sp	ouse if, filing)	First Name	Middle Name	Last Name	
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS	
	se number				☐ Check if this is an amended filing
St	as complete a	of Financial Af	. If two married people are	als Filing for Bankruptcy	
nun	nber (if knowı	n). Answer every questio		s form. On the top of any additional pages,	, write your name and case
1.		r current marital status?	in Otatas and Where Tou En	Total Bolloto	
	☐ Married ■ Not mar				
2.	During the la	ast 3 years, have you live	ed anywhere other than who	ere you live now?	
	□ No ■ Yes. Lis	st all of the places you lived	d in the last 3 years. Do not ir	nclude where you live now.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there
	800 S Elm Mount Pro	hurst ospect, IL 60056	From-To: 1/15 - 7/15	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
	Apt. 305	terprise Drive ospect, IL 60056	From-To: 7/13 - 1/15	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
3. stat				equivalent in a community property state of a, New Mexico, Puerto Rico, Texas, Washing	
	☐ Yes. Ma	ake sure you fill out Sched	ule H: Your Codebtors (Officia	al Form 106H).	
Pa	rt 2 Explai	in the Sources of Your In	come		
4.	Fill in the total	al amount of income you re	eceived from all jobs and all b	business during this year or the two prevousinesses, including part-time activities. gether, list it only once under Debtor 1.	ious calendar years?

☐ No

Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Debtor 1 Melanie A. Knippen

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Case number (if known)

			Dobton 4		Dobtor 2			
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions an exclusions)	Sources of inco		ductions	
		■ Wages, commissions, bonuses, tips			missions,			
			☐ Operating a business		☐ Operating a b	ousiness		
For last cale (January 1 to	endar year: o December :	31, 2016)	■ Wages, commissions, bonuses, tips	\$0.0	0 ☐ Wages, common bonuses, tips	nissions,		
			☐ Operating a business		☐ Operating a b	ousiness		
	ndar year bef o December 3		■ Wages, commissions, bonuses, tips	\$11,390.0	0 ☐ Wages, common bonuses, tips	nissions,		
			☐ Operating a business		☐ Operating a b	ousiness		
■ No	source and the source and the source	Ü	me from each source separat	ely. Do not include incon	ne that you listed in line	3 4.		
			Debtor 1		Debtor 2			
			Sources of income Describe below.	Gross income from each source (before deductions an exclusions)	Sources of inco Describe below.	Ome Gross inco (before dec and exclusi	ductions	
Part 3: Lis	st Certain Pa	yments You	Made Before You Filed for I	Bankruptcy				
6. Are eithe ☐ No.	Neither De individual p	ebtor 1 nor Dorimarily for a	s debts primarily consumer ebtor 2 has primarily consu personal, family, or househol re you filed for bankruptcy, did	mer debts. Consumer a d purpose."			red by an	
	□ _{No.}	Go to line 7.						
	☐ Yes * Subject t	paid that cre	ach creditor to whom you paid ditor. Do not include paymen payments to an attorney for the on 4/01/19 and every 3 years	ts for domestic support on the support of the suppo	bligations, such as chil	ld support and alimony. A		
■ Yes		or 1 or Debtor 2 or both have primarily consumer debts. g the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?						
	■ No.	Go to line 7.						
	□ Yes	include payr	ach creditor to whom you paid nents for domestic support of this bankruptcy case.					
Credito	r's Name and	l Address	Dates of payme	nt Total amount		Was this payment for	···	

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Case number (if known) Document Debtor 1 Melanie A. Knippen

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and a	ou are a general ny managing ag	partner; corporations ent, including one for		
	■ No							
	Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment		
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	No							
	Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite			
	t 4: Identify Legal Actions, Repossession	,						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.							
	Case title Case number	Nature of the case	of the case Court or agency		Status of the case			
	Bank of America	Collection Cook County, IL		L	Pending			
	VS	•			☐ On appeal			
	Melanie A. Knippen 17 m2 6				☐ Concluded	d		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis	hed, attached,	seized, or levied? Value of the property		
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount		
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the benefi	it of creditors, a		

Debtor 1 Melanie A. Knippen

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Case number (if known)

Par	t 5: List Certain Gifts and Contributio	ns						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?							
	■ No							
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$6 per person	00	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No							
	☐ Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? ■ No □ Yes. Fill in the details.							
	Describe the property you lost and	Desc	ibe any insurance coverage for the loss Date of your Value of prope					
	how the loss occurred	Includ	le the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loss	lost			
Par	<u> </u>							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? nclude any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090		Attorney Fees	1/20/17	\$1,015.00			
17.	Vithin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who romised to help you deal with your creditors or to make payments to your creditors? o not include any payment or transfer that you listed on line 16.							
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid		Description and value of any property	Date payment	Amount of			
	Address		transferred	or transfer was	payment			

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Case number (if known) Document

Debtor 1 Melanie A. Knippen

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.									
	No									
	Yes. Fill in the details.	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and property transfer		Describe any prope payments received paid in exchange						
	Person's relationship to you									
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a se	elf-settled trust or simi	lar device of which you are a					
	Yes. Fill in the details.									
	Name of trust	Description and	value of the prope	erty transferred	Date Transfer was made					
Par	8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	it Boxes, and Stor	age Units						
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o	•		•						
	houses, pension funds, cooperatives, associ			i deposit, silares ili ba	inks, credit unions, brokerage					
	No									
	Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	t or Date accoun closed, sold, moved, or transferred						
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No									
	Yes. Fill in the details.									
	Name of Financial Institution	Who also had as	oogs to it?	Describe the contents	Do you still					
	Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		bescribe the contents	have it?					
22.	Have you stored property in a storage unit o	r place other than you	r home within 1 ye	ear before you filed for	bankruptcy?					
	=									
	No									
	Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?					
Par	9: Identify Property You Hold or Control	for Someone Else								
23.	Do you hold or control any property that so for someone.	neone else owns? Incl	lude any property	you borrowed from, a	e storing for, or hold in trust					
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the property	Value					
		,								

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Melanie A. Knippen

toxic substances, was	tes, or material ir	nto the air, land, so	il, surface water,	groundwater,	or other medium,	including statutes or
regulations controlling	the cleanup of the	hese substances, v	wastes, or materi	ial.		_

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.									
Rep	ort a	all notices, releases, and proceedings th	nat yo	u know about, regardless of whe	n the	ey occurred.				
24.	Has	s any governmental unit notified you tha	at you	may be liable or potentially liable	e unc	der or in violation of an environm	ental law?			
		No								
		Yes. Fill in the details.								
		me of site Idress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice			
25.	Hav	ve you notified any governmental unit of	f any ı	release of hazardous material?						
		No Yes. Fill in the details.								
		me of site Idress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice			
26.	Hav	ve you been a party in any judicial or ad	minis	trative proceeding under any env	rironr	mental law? Include settlements	and orders.			
		■ No □ Yes. Fill in the details.								
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11	Give Details About Your Business or	Conr	nections to Any Business						
27.	Wit	hin 4 years before you filed for bankrup	tcy, d	lid you own a business or have a	ny of	the following connections to an	y business?			
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
		☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation									
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
	No. None of the above applies. Go to Part 12.									
		Yes. Check all that apply above and fil	ll in th	ne details below for each busines	s.					
		siness Name Idress	Des	scribe the nature of the business		Employer Identification number Do not include Social Security				
	(Nu	mber, Street, City, State and ZIP Code)	Nar	ne of accountant or bookkeeper		Dates business existed				
28.		hin 2 years before you filed for bankrup titutions, creditors, or other parties.	tcy, d	lid you give a financial statement	to ar	nyone about your business? Incl	ude all financial			
		No Yes. Fill in the details below.								
	Ad	me Idress mber, Street, City, State and ZIP Code)	Dat	e Issued						

Part 12: Sign Below

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Melanie A. Knippen Signature of Debtor 2 Melanie A. Knippen Signature of Debtor 1 Date February 17, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No ☐ Yes

Debtor 1

Melanie A. Knippen

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Melanie A. Knipp	en		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
,				amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Desc Main Case 17-04647 Doc 1 Filed 02/17/17 Entered 02/17/17 13:31:36 Document Page 41 of 51 Debtor 1 Melanie A. Knippen Case number (if known) name: ☐ Yes ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: ☐ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Lessor's name: □ No Description of leased Property: ☐ Yes Lessor's name. □ No Description of leased Property: ☐ Yes Lessor's name: ☐ No Description of leased Property: ☐ Yes Lessor's name: ☐ No Description of leased Property: ☐ Yes Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Melanie A. Knippen X
Melanie A. Knippen Signature of Debtor 1

X Signature of Debtor 2

Date February 17, 2017 Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Cha	pter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-04647 Doc 1 Filed 02/17/17 Entered 02/17/17 13:31:36 Desc Main Document Page 46 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

			1 to the District of Innions				
In r	e Melanie A. K	nippen		_ Case No.			
			Debtor(s)	Chapter	7		
	DIS	SCLOSURE OF COM	IPENSATION OF ATTORN	EY FOR DI	EBTOR(S)		
1.	compensation paid	to me within one year before the	2016(b), I certify that I am the attorney face filing of the petition in bankruptcy, or a ation of or in connection with the bankrup	greed to be paid	to me, for services rendered or to		
	For legal servi	ices, I have agreed to accept		\$	1,015.00		
	Prior to the fili	ing of this statement I have rece	eived	\$	1,015.00		
				\$	0.00		
2.	The source of the co	compensation paid to me was:					
	Debtor	☐ Other (specify):					
3.	The source of comp	pensation to be paid to me is:					
	Debtor	☐ Other (specify):					
4.	■ I have not agree	ed to share the above-disclosed	compensation with any other person unle	ess they are mem	bers and associates of my law firm		
			npensation with a person or persons who a he names of the people sharing in the con				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	b. Preparation andc. Representation ofd. [Other provision Negotiation agreeme	I filing of any petition, schedules of the debtor at the meeting of c ns as needed] cions with secured creditors	rendering advice to the debtor in determing, statement of affairs and plan which may be reditors and confirmation hearing, and are sto reduce to market value; exempleded; preparation and filing of motorods.	y be required; ny adjourned hea otion planning;	rings thereof;		
6.	Represer		sed fee does not include the following ser by dischargeability actions, judicial ceeding.		es (except in Chapter 13		
			CERTIFICATION				
this	I certify that the for bankruptcy proceedi		of any agreement or arrangement for pay	ment to me for r	epresentation of the debtor(s) in		
<u> </u>	February 17, 2017	7	/s/ David M. Siegel				
1	Date		David M. Siegel				
			Signature of Attorney David M. Siegel & As	sociates			
			790 Chaddick Drive				
			Wheeling, IL 60090 (847) 520-8100				

Name of law firm

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A **FLAT FEE** as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

a) Debts for most taxes;

H.

- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;

The FLAT FEE for representation in this matter will be \$

h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an

opportunity to ask questions regarding this agreem	ent, is satisfied with it, and accepts it in its entirety.
Date: 1.20.17	Signed:
	Print: Melanie Knippen
Date:	Signed:
	Print:
Date: 1 30 17 Signed:	

Attorney for David M. Siegel

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United States Bankruptcy CourtNorthern District of Illinois

		1 (of the H District of Immors		
In re	Melanie A. Knippen		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M	1ATRIX	
	· ·		11111111	
		Number of	f Creditors:	20
	The above-named Debtor(s (our) knowledge.) hereby verifies that the list of credi	tors is true and correct to	the best of my
Date:	February 17, 2017	/s/ Melanie A. Knippen Melanie A. Knippen		

Artesian Wellness and Recovery Cent 2500 S. Kanner Hwy Stuart, FL 34994

Bank of America Bankruptcy Department CA6-919-0241, PO Box 5170 Simi Valley, CA 93062

Bank of America PO Box 982238 El Paso, TX 79998-2238

Basic Whole Body Wellness LLC 4371 Northlake Blvd. #203 Palm Beach Gardens, FL 33410

Behavioral Health Servicesw at St. Lucie Medical Center PO BOX 740776 Cincinnati, OH 45274

Best Buy Credit Services PO Box 78009 Phoenix, AZ 85062-8009

Best Buy/CBNA PO Box 6497 Sioux Falls, SD 57117-6497

Blatt, Hasenmiller, Leibsker 10 S. LaSalle St., Ste. 2200 Chicago, IL 60603

Cap1/BSTBY
PO Box 30253
Salt Lake City, UT 84130

Century Clinical Lab Inc. 1395 ShotgunRd. Sunrise, FL 33326 Chase Card PO Box 15298 Wilmington, DE 19850

First Financial Bank SD 363 W. Anchor Drive North Sioux City, SD 57049-5154

Medicredit, Inc. PO Box 1629 Maryland Heights, MO 63043-0629

Natera PO BOX 8427 Pasadena, CA 91109

Pharmerica PO BOX 644458 Pittsburgh, PA 15264

Portfolio Recovery Associates 120 Corporate Blvd., Ste. 100 Norfolk, VA 23502

Portfolio Recovery Associates Bankruptcy Department 500 W. 1st Ave Hutchinson, KS 67501-5222

Target NB CCS Gray OPS Center PO Box 6497 Sioux Falls, SD 57117

Target NB Attn:Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440

The Garden Wellness Center 16565 NE 4th Ave. Miami, FL 33162